## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

<b>Application</b>	or	<b>Docket</b>	Number
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CMI-470

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE C			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS		ちゃ				ſ	RATE	FEE		RATE	FEE	
FOF	R NUMBER FILED		NUMBE	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS 50 minus 20=			* ,	50		X\$ 9=		OR	X\$18=	540		
INDEPENDENT CLAIMS 5 minus 3 =			*	2_		X42=	-	OR	X84=	160		
MULTIPLE DEPENDENT CLAIM PRESENT						j	+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						I	TOTAL		OR	TOTAL	1416	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•	SMALL	NTITY	OR	OTHER SMALL	
AMENDMENTA	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NON	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	★ 1998	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		<u> </u>	+140=		OR	+280=	
			• • • • • • • • • • • • • • • • • • • •		4.200			TOTAL		OR	TOTAL	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
ENT B	•	CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER IOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
₩ Q	Total		Minus	**	•	=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***	<del>-</del> 0. 404	=	11	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<b>.</b>	+140=		OR	+280=	
		# 3						TOTAL ADDIT. FEE		OR	TOTAL ADDIT: FEE	
		(Column 1)			ımn 2)	(Column 3)		,		-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NÚI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	11	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	IT CLAIM		J	+140=			+280=	
	f th ntry in colu	ımn 1 is less than i	the ntry in colu	ımn 2, wri	t "O" in co	olumn 3.	_ [	TOTAL		OR	TOTAL	
***	** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
**	** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE											